SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Zoning Department P.O. Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



유명유교 will be issued until all fees are palleayfield Co. Zoning Dept

	Amount Paid: \$75/00 EDS	Zoning District	Date: 4-226-	Application No.	
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Date of Approval	Inspector	Signed	8	Rec'd for Issuance	
11-25-4 Jr-25-1					
Variance (B.O.A.) #			ss D No B	Mitigation Plan Required: Yes	
Date of Inspection $1-2c \cdot l / \sqrt{-2 \cdot l \cdot l}$	30	full and		Carry + + FA Leavet	The state of the s
adda - Anew to be con	尼 有层面的 如	185/CODMASS	A RAISE	Reason for Denial:	The second secon
ied (Date)	278 Permit Denied (Date)	Permit Number 13-0	Pen	Date 4-26-10	
Date	er Lawfautowa fau	¥		Permit issued:	
ATTACH Copy of Tax Statement or (If you recently purchased the property Attach a Copy of Recorded Deed)	E.O.D.D.B.S.A. FOU POL DO W. F. 5U 806 PLEASE COMPLETE REVERSE SIDE	1 3 0	Ston	to send permit Kord L	Address * See
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL KESOLD IN FERMINATE (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. Owner or Authorized Agent (Signature) Date Owner or Authorized Agent (Signature)	JCTION WITHOUT A PERMIT ned by me (us) and to the best of my (c I(we) am (are) providing and that it will nty relying on this information I (we) ess to the above described property	or STARTING CONSTRUME ing information) has been examing information) has been examing and accuracy of all information by he a result of Bayfield Compounty ordinances to have accomposed to the accuracy of the second seco	JN A PERMIT or g any accompanying g any accompanying usible for the detail at ability which may be administering course.	FAILURE TO OBTAIN I (we) declare that this application (including any (we) acknowledge that I (we) am (are) responsibly to issue a permit. I (we) further accept liabilities to county officials charged with additional consent to county officials charged with additional official officials charged with additional o	I (we) (we) a to issi consei
☐ External Improvements to Accessory Building (explain)	☐ External Improvements to Accessory Buildin		dition (explain)	Residential Accessory Building Addition (explain)	
explain)	☐ Special/Conditional Use (explain)	TORRE! VE	24 %	Residence sq. ii	
ailding Addition (explain)	☐ Commercial Accessory Building Addition (explain)		Deck(2) sq. tt # of bedrooms) _ Garage sq. ft	Deck sq. ft Deck(2) sq. ft	□ * Pe
ding Addition (explain)	 ☐ Commercial Principal Building Addition (expl ☐ Commercial Accessory Building (explain) 		pedrooms)	Residence w/deck-porch (# of bedrooms) Residence sq. ftPorch sq	□ Re **
su date)	☐ Commercial Principal Building		e (# of bedrooms)	☐ ※ Residence or Principal Structure Residence sq. ft.	Re ₩
\ X	Sanitary: New Existing Type of Septic/Sanitary System	lage 168 F	Square Footage	Structure: New V Addition Fair Market Value Addition USE:	Structure: Fair Mark USE:
ter than 75' 😿 75' to 40' 🔲 less than 40 🗐	= ==	No [] If yes.	e? Yes□	your structure in a Shoreland Zone?	ls you
Yes No No	Written Authorization Attached:	(Work)	(Home)	715/682-65	Telephone
	Plumber W/# Authorized Agent	I	Sounds	Address of Property 64010	Addres
Phone 373-0299	. 18° ~	7	Donna	y Owner Con	Property
08-33-4-00-207-02000	ledin CSM#	Subdivision Lev	_Block	South 140" Lot Lot 173 Page 283	Seul4 Gov't Lot
& West Town of		1/4 of Section <u>33</u> Township	1-K1V	LAND USE X SANITARY L Use Tax Statement for Legal Description 1/4 of	LAND <u>Use Ta</u> Lenal D
BOA OTHER	TO APPLICANT.	S HAVE BEEN ISSUED	TIL ALL PERMIT e Zoning Departm	# 0 F	Changes
	Ultra in the control of the control	rtment	unty Zoning Depa	made navable to: Bayfield Co	7. 25. KC

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Signature of Intoector Hold For	littee or Board	Lase #: Arcel Legally Created Iding Site Delineated Lead Society Cod. Delineated Cod. Delineated Cod.	rcel a Sub-Standard Lot	Issuance Information (County Use Only) Permit Denied (Date):	one previously surveyed conner to the owner's expense. marked by a licensed surveyor at the owner's expense. (9) Stake or Mark Proposed NOTICE: All Land For The Construction Of No	Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting) Setback to Privy (Portable, Composting) Setback to Privy (Portable, Composting) Fior to the placement or construction of a structure within ten (10) feet of the minimum other previously surveyed corner or marked by a licensed surveyor at the owner's expension of the placement or construction of a structure more than ten (10) feet but less that prior to the placement or construction of a previously surveyed corner, or verifiable by the placement or construction of a previously surveyed corner, or verifiable by the placement of construction of the placement of construction of the placement or construction of the placement of construction of the placement of construction of the placement of the minimum prior to the placement of construction of the minimum prior to the placement of construction of the minimum prior to the placement of construction of the minimum prior to the placement of construction of the minimum prior to the minimum prior to the placement of construction of the minimum prior to the placement of construction of the minimum prior to the placement of construction of the minimum prior to the placement of construction of the minimum prior to the placement of construction of the minimum prior to the placement of construction of the minimum prior to the placement	(8) Setbacks: (measured to the closest points) Description Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line	@	7 928	now location of: now / Indicate: now location of (*): how: how: how any (*): how any (*):	In the box below Draw or Sketch your Proper
r TBA: Hold For Affidavit:	Inspected by: ditions Attached? □ Yes □ No -{If No they need to be attached.}		☐ Yes (Deed of Record) ☐ No Mitigation Required ☐ Yes ☐ Yes (Fused/Contiguous Lot(s)) ☐ No Mitigation Attached ☐ Yes ☐ No Previously Granted by Variance #: ☐ Yes ☐ No	nly) Sanitary Number: Reason for Denial: Permit Date:	owner to true owner's expense. Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), a Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), a Stake or Mark Proposed Location(s) of New One & The One (1) Year from the Date of Issuance if Construction or Use has not begun. NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	Septic Tank or Holding Tank Feet Drain Field Feet Privy (Portable, Composting) Privy (Portable, Composting) Feet Setback to Well Feet Feet Feet Setback to Well Feet Fe	Feet Setback from the Beet Setback from Wetling Feet Setback from Wetling Feet Setback from 20%: Feet Setback from Wetling Feet Setback from 20%: Feet Elevation of Floodp	phop Line swift Bid	12 - N. 22 W. 22 W	ge Road) DF); (*) Holo A&	Draw or Sketch your Property (regardless of what you are applying for)
Hold For Fees:		Represented by Owner Was Property Surveyed Zoning District (☐ Yes ☐ No Affidavit Required ☐ Yes ☐ No Affidavit Attached ☐ Yes ☐ Yer	# of bedrooms: Sanitary Date:	n field (DF), Holding Tank (HT), Privy (P), and Well (W). Construction or Use has not begun. ired To Enforce The Uniform Dwelling Code. so require permits.	must be visible from one previously surveyed corner inch the setback must be measured must be visible freet of the proposed site of the structure, or must be	Description Measurement Feet ke (ordinary high-water mark) ver, Stream, Creek Feet ank or Bluff Feet Slope Area Feet Islain Feet Feet	Changes in plans must be approved by the Planning & Zoning Dept.		/or (*) Privy (P)	es s